



ASC Utilization Report  
State Form 49933 (R3/6-05)  
Indiana State Department of Health  
Acute Care

Status: Finalized

I. Center Identification

Organization Name: METRO SPECIALTY SURGERY CENTER

Street Address: 200 Missouri Ave Ste A

City: Jeffersonville

County: Clark

Administrator Name: Katie Arnold RN

Administrator Email: karnold@metrospecialty.com

ASC Web Address: www.metrospecialty.com

Fiscal Year: 2019

Accredited:  Yes  No

Name of Accrediting Body: Joint Commission

Deemed Status:  Yes  No

Corporate Tax Status:  For Profit  Non Profit

II. Identification of Surgical Resources

Number of operating rooms	2
Number of procedure rooms	2

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	2182	30,187
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
29881	269	
29827	224	
29826	191	
69436	123	
30140	121	
29822	114	

29888	108
29828	86
29806	80
27130	79

#### IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	3
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